## SOUTH DAKOTA DIVISION OF INSURANCE 124 S Euclid Ave, 2<sup>nd</sup> Floor

124 S Euclid Ave, 2<sup>nd</sup> Floor Pierre, South Dakota 57501 Main Line (605) 773-3563 Fax: (605) 773-5369 http://dlr.sd.gov/insurance

## PREMIUM TAX REPORT SURPLUS LINES BROKER

REPORT	OF PREMIUMS COLLECT	ED AS OF DE	CEMBER 31, _	DUE: <u>APRIL 1</u>
QTR	due April 30 / 2 <sup>nd</sup> QTR due Jan 31, ( ENTER YEAR)	Please check w	hich report is b	eing filed – Qtrly/Annual
NAME:	(ENIER IEAR)			
BUSINESS	NAME:			
BUSINESS	ADDRESS:			
License Nun	nber:	HONE:		
EMAIL ADI	DRESS:			
PART I. SU	URPLUS LINES PREMIUM C	COLLECTED:		
	ce Companies and the premium collect me & address of the insured, effective		of premium writte	
<b>NAME</b> 1.		ADDRESS		DLLECTED
2.				
3.				
	TOTAL	PREMIUM W	RITTEN \$	*
*This amount	must equal PART II line 3.		===	=====
PART II.	PREMIUM COLLECTED RE	PORT:		
То	tal Fire premium collected	(1) \$		
То	otal Other premium collected	(2) \$		
Add: (1)	+ (2) Total Premium Collected <b>PREMIUM TAX CALCULAT</b>	(3) \$		
Multiply Lin	ne (1) x SD Fire Premium Tax F	Rate: 3% =	(4) \$	
Multiply Lin	ne (2) x SD All Other Premium	Γax Rate: <b>2.5%</b>		
Add: (4) +(	5): Total Premium Tax =			

To figure the Fire premium on policies see chart below:

Fire – Total Premium x 100% at the 3% tax rate

(Broker's Signature)

Farmowners – Total Premium x 35% at the 3% tax rate & 65% of premium at the 2.5% tax rate.

Homeowners - Total Premium x 35% at the 3% tax rate & 65% of premium at the 2.5% tax rate.

Commercial Multi-Peril - Total Premium x 35% at the 3% tax rate & 65% of premium at the 2.5% tax rate.

**Inland Marine** - Total Premium x 15% at the 3% tax rate & 85% of premium at the 2.5% tax rate.

Automobile Physical Damage - Total Premium x 20% at the 3% tax rate & 80% of premium at the 2.5% tax rate.

**QUARTERLY REPORT** -- <u>SDCL 58-32-44: "If in any PRIOR calendar year a surplus lines broker collects and remits in excess of five thousand dollars (\$5,000.00) of surplus lines premium tax, he/she shall in the FOLLOWING year remit the tax on a quarterly basis."</u>

shall in the FC	DLLOWING	G year remit th	ne tax on a quarte	rly basis."	•			
<u>Quarter</u>	Date <u>Due</u>	Check <u>Date</u>	Check <u>Number</u>	Amount <u>Paid</u>				
First	4/30							
Second	7/31							
Third	10/31							
Fourth	1/31							
Sub-Total of	Quarterly	Payments:	(7) \$					
<b><u>Deduct</u></b> Cred	lits Due (A	ttach Itemized	List or Explanati	<u>on</u> ): (8) \$				
Total: (Line 6 less Line 7 less Line 8)								
Add ** Inter	est, Fines,	Penalties Due	(if Any):	(10) \$				
Total Amount Due: (Line 9 plus Line 10)				(11) \$				
					nalty fee of one and one- nce. [SDCL 10-44-16].			
BOND INFORMATION IS FOR RESIDENT BROKERS ONLY								
BOND #			EXPIRATIO	ON DATE OF BON	ID:			
COMPANY V	WRITING 1	BOND:						
I certify that th	he above in	formation is tr	rue and correct.					

(Date)